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AUTHOR Herman, Judith
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ABSTRACT

Rates of sexual assault on women are sufficiently high that women live with a lifelong, pervasive fear of violence. Research has just begun to identify and analyze the health and mental health effects of sexual assault on victims, and studies are investigating the social and individual motivations of perpetrators. This document contains a colloquium lecture on the issue of sexual violence which looks at the victims of sexual assault and the offenders. It discusses social attitudes toward sexual assault, concluding that most sexual assaults are implicitly condoned by society. It considers the social functions of sexual violence, asserting that sexual assault is a socialized behavior and a means by which male supremacy is enforced and perpetuated. Strategies for resistance are suggested, and the organized efforts of women in the last 10 years are noted as having changed rape laws in every state, created rape crisis centers in every major city, established the National Center for Prevention and Control of Rape, and ended secrecy and raised consciousness about rape. Several implications of sexual violence for women's psychological development are explored. A series of questions, answers, and highlights of a discussion session which followed the colloquium lecture are included in the paper. (Author/NB)

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Stone Center for Developmental Services and Studies

Colloquium:
Sexual Violence

Judith Herman, M.D.

The subject of sexual violence carries a taboo that is firmly impressed in both individual and social consciousness. As a result of the women's movement, discussions of sexual violence have been made public in the last decade. Now we are at a stage where we know a lot about sexual violence, but we don't know how deeply it affects us.

Who are the victims?

Research in recent years—inspired and influenced by the women's movement—has provided startling data about sexual assault:

Diana Russell [1] conducted a random sample survey of 930 California women to learn about their experiences with sexual assault. Using highly trained, sensitive interviewers, Russell secured good cooperation and did thorough, in-depth interviews with women about their sexual experiences. Twenty-four percent of the women reported they had experienced at least one completed rape; 44 percent reported at least one attempted rape. Incidentally, that means almost half of the women who endured a rape attempt got away, and I believe those women are a hidden resource for all of us. We don't know how they did it—but we need to know.

David Finkelhor,[2] a sociologist at the University of New Hampshire, did a similar survey of more than 500 women college students. Twenty-four percent of his subjects said they had experienced a forced sexual experience. We don't know how many of these were rape by a stranger and how many were rape by people that, to some extent, were known and trusted. Nonetheless, we do know that from the moment that women begin to socialize with men the possibility of sexual assault asserts itself.

Eugene Kanin and Stanley Parcell,[3] did a survey of

About the Speaker

Judith Herman, M.D., is a member of the Women's Mental Health Collective, Somerville, Massachusetts, and Assistant Clinical Professor of Psychiatry at Harvard Medical School. Her book Father-Daughter Incest *illuminates the prevalence and effects of incestuous relationships, and her clinical and professional interests have included studies of other forms of sexual assault.*

Abstract

Rates of sexual assault on women are sufficiently high that women live with a lifelong, pervasive fear of violence. Research has just begun to identify and analyze the health and mental health effects of sexual assault on victims, and studies are investigating the social and individual motivations of perpetrators. The women's movement gradually is breaking through secrecy, denial, and justifications that have sustained sexual violence as a means to enforce male supremacy. Fear of sexual assault affects women's psychological development, especially as it is mediated through the mother-daughter relationship.

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college women, 83 percent of whom reported that they had suffered some kind of "sexual aggression"—that is, some attempt at forced sexual contact. Thirty-two percent said they had at least one forceful attempt at intercourse in a dating situation.

Neil Malamuth[4] went at it a different way and interviewed men. Twenty-five percent of the college men he interviewed said that they would be willing to use force to get sex, and 51 percent said they would be willing to attempt rape if they were sure they could get away with it. He concluded that these male college students held an attitude of entitlement to use force to coerce sex in a dating situation. This willingness to resort to force as the ultimate instrument of control persists throughout marriage. Another of Diana Russell's findings—the one that led to her book *Rape in Marriage*[1]—was that one in seven of the married women she interviewed had been raped by her husband. (Russell's definition of rape was the strict legal definition—use of force, or a weapon, or threat of force, to obtain intercourse.) In other words, being with men that we know and trust doesn't necessarily assure safety. We who are unescorted are at risk for street rape, and we who are escorted by men are at risk for date rape and marital rape.

Childhood does not offer us much protection either, but the realities have been unaddressed for a long time. In fact, one of the ignored findings in the Kinsey report of 30 years ago[5] is that one woman in four reported a sexual contact with an adult male before reaching the age of twelve. Most of the assailants were known to the children. Kinsey also reported that 6 percent of his sample had a sexual relationship with an older male relative, and 1 percent had been involved in father-daughter incest. Considering his sample—more than 4000 women who were mostly white, middle-class, urban, and educated—those figures are probably conservative. In fact, Diana Russell, with a more random sample, came up with much higher figures: Thirty-eight percent of her sample had a childhood sexual contact with an adult male. Sixteen percent had a contact with a relative, and 4.6 percent were involved in father-daughter incest.[6]

These are the statistics on major assault, and they represent incidents that victims generally are ashamed to acknowledge. When it comes to minor assaults, however, there emerges a curious discrepancy. When discussing incidents like obscene phone calls, an encounter with an exhibitionist, or being in a crowd and suddenly feeling hands where you don't want hands to be, I find that people usually make light of these assaults and don't hold the victims responsible for them. We give the perpetrators humorous names—"flashers," "mashers," "breathers," "peepers"—and as victims we don't feel ashamed to admit having experienced the minor assaults. I am confident that most people in this audience have experienced such assaults, and I am confident that not many of you could laugh off the experience at the time it happened. My experience, and that of most people I talk to, is that such incidents are frightening and humiliating.

Further, in the war between the sexes, I submit that these minor assaults are equivalent to cross burnings or to the discovery of a swastika painted on a building. They are ominous warnings of threats that we prefer to repress, the ultimate threat being the rape-murder. Taken together, the research findings and our gut-level feelings point to a conclusion that no girl or woman is currently safe from sexual assault, and that to be female is to be subject to the possibility of a sexual assault.

Who are the offenders?

I would like to submit the proposition that perpetrators of sexual assault are, for the most part ordinary men. Let's deal first with the proposition that they are men. In cases of rape or sexual abuse of women and girls, this is generally recognized—for example, studies of incest indicate that about 97 percent of the perpetrators are male. It is less generally understood that even in cases where boys or men are victimized the vast majority of offenders are male. For example, David Finkelhor[2] also surveyed male college students about their childhood sexual experiences. About 10 percent of them had had a sexual encounter with an adult during childhood, and 84 percent of these adults were male.

Now for the proposition that perpetrators are ordinary people. Of course we don't know a great deal about perpetrators, because they don't volunteer for study. Generally the only ones who have been studied are those who have been reported, arrested, tried, convicted, and imprisoned. According to Diana Russell's survey data, only 6 percent of the sexual assaults were ever reported to the police. Of that 6 percent, only a small fraction ever saw the inside of a courtroom, let alone the inside of a prison. So imprisoned sex offenders constitute an extremely small minority and an extremely skewed sample of the whole. This prison population does look fairly deviant, but I think it is a great mistake to generalize on the basis of prisoner studies.

How, then, can we find out anything about sex offenders? At present I believe that our best information source, failing direct observation, is the reporting by victims.

In my own research[7] with incest victims we interviewed women who, for the most part, had never disclosed the incest, so it had never come to the

attention of any law enforcement, criminal justice, or health authorities. The two descriptions that I heard over and over until they were predictable cliches were that the man was a "pillar of the community" and a "good provider." The other comments I heard over and over were, "Nobody would have believed me," and, "Nobody would have believed that this man would do such a thing." I believe that if we could identify and study the husbands who raped their wives, or young men who rape the women they are dating, we would find the same thing. In fact, occasionally when such persons do come to trial, it is common to see a parade of character witnesses for the perpetrator, affirming what an upstanding, promising young man he is, or what a wonderful husband and father he is.

We can't diagnose sex offenders very well, because their pathology simply is an exaggeration of accepted norms of male dominance. All too frequently we make the mistake of generalizing from the few losers who get caught—persons who often are quite disturbed—into creating a falsely reassuring picture of the sex offender as a beast that we would be able to recognize easily. We can't do that. I admit that the first incestuous father I saw was someone that I was prepared to hate; already I had seen his wife and his two daughters, and I had heard horror stories about him. But he came to my office and he was charming. He was mild-mannered, pleasant, ingratiating; he couldn't understand why this matter had been blown so out of proportion. Really, what was all the fuss about?

Social attitudes toward sexual assault

Although this offender's presentation of his story was, naturally, self-serving, I believe that in part his confusion was genuine. For in his world, which also is our world, most sexual violence either is explicity sanctioned or implicitly condoned. As the legal scholar and feminist theorist Catherine MacKinnon puts it, sexual assault is "...not prohibited, but regulated."[8] And having sex with one's own daughter falls well within the regulations, for, in practice, only the forms of sexual violence that involve an assault on another man's property are criminalized.

Marital rape is explicity sanctioned, and, as feminists in the last 10 years have found, it is one of the hardest parts of the rape law to change. Until 1975 every state exempted husbands from the rape statutes. Last year's tally shows that eight states have revised their laws explicitly so that husbands may be prosecuted for rape. The legal basis for the *marital rape exemption*, as it is called, is a statement called the "Hale Doctrine." Matthew Hale was a British Chief of Justice in the 17th century and a famous witch prosecutor. His doctrine read: "But the husband cannot be guilty of a rape committed by himself upon his lawful wife for, by their mutual matrimonial consent, and contract, the wife has given up herself in this kind unto the husband, which she cannot retract."[9] Or, as California State Senator Bob Wilson said when the California rape law was up for revision, "If you can't rape your wife, whom can you rape?"[1]

Most sexual assaults fall into the category of those that are implicitly condoned. The mechanisms of social approval begin with secrecy and shaming of the victim and, if secrecy fails, escalate to explicit rationalizations and justifications, even celebrations, of rape.

Secrecy is rooted in shaming the victim and discrediting her story, and frankly we in the psychiatric profession have had a long and dishonorable role in maintaining the denial of such sexual assault. But we are not alone; the legal tradition has been equally culpable.

Denial within the medical and mental health professions goes back to Freud who, in his early work, saw many upper-middle-class Viennese women complaining of hysteria. What they were hysterical about, they revealed, were sexual assaults by men that they knew and trusted—frequently their fathers. Freud initially believed his informants, took them seriously, and in an 1896 essay called "The Aetiology of Hysteria"[10] proposed the seduction theory, which postulated that at the basis of every case of hysteria was a childhood sexual assault. Within a year he retracted that theory—not because he found new evidence from patients—but because he could not believe that there were so many incest cases.[11] In other words, he would not accept the notion that there were so many incestuous fathers among the well-to-do bourgeoisie of Vienna. Later he not only repudiated his seduction theory, but also falsified his incest cases, identifying the perpetrators as governesses, other children, and in two cases he professed that uncles were to blame. Eventually he admitted that those two were father-daughter cases. He went on to claim that the women's reports of sexual assault were fantasy, and on that basis developed the concept of the Oedipus Complex which has been the core of dominant psychological theory for nearly a hundred years.

Shifting focus from the reality of sexual assault to the fantasy life of the victim certainly drew a veil of secrecy over incest and child sexual assault. It sent the whole question of sexual assault under cover within the mental health professions. Even in the 1970s, 25 years after the Kinsey report, the *Comprehensive Textbook of Psychiatry*[12] was still stating that the estimated prevalence of all forms of incest is one case in a million. In my own training there was no mention of

sexual assault, and I think that is true in most psychiatric training.

The legal tradition followed the psychiatric doctrine. John Henry Wigmore is to the legal tradition what Freud is to the psychiatric tradition. He is the author of the "Treatise on Evidence," which still forms the basis and standard of a great deal of legal practice. On the question of sexual assault, Wigmore set forth a doctrine that impugned the credibility of any woman who claimed that she had been victimized. Let me read from the Wigmore "Treatise on Evidence:"

> Obviously, there are types of sex offenses, notably incest, which by the very nature of the charge, bears grave danger of completely false accusations by young girls of innocent appearance but unsound mind, susceptible to sexual fantasies and possessed of malicious, vengeful spirit."[13]

To this day the worry about false complaints dominates the legal approach to sexual assault cases.

Shaming and intimidation also are components of denial. In order to keep the denial going, you have to keep the victims quiet. And until the last 10 years, when speakouts began, the technique has been effective—so much so that even in Russell's survey we learn that only 6 percent of the rapes[1] and only 3 percent of the child sexual assaults were ever reported.[6]

We don't know the real figure for rates of incest, but Diana Russell's data indicated around 5 percent of women have experienced father-daughter sexual contact.[6] Some people claim that it may be even higher, for we never know all the women who have repressed the memory entirely.

When secrecy fails, the explicit justifications of sexual assault begin. These are found not only in pornography and men's magazines, which one might expect, but also in all forms of literature, including the professional literature. These are the same as the common rationalizations that one hears from the perpetrators who get caught. The first is that the sexual assault did no harm, and in fact was good for her. Indeed, there is a substantial school of thought that maintains that women need and desire rape. One of the favorite pornographic fantasies is that of the frigid prude who is transformed by rape into a woman who is not just sexually responsive, but a kind of slavering nymphomaniac.

When Kinsey came across his shocking findings about childhood sexual assault, he didn't actually suppress his results, but did his best to minimize their significance. His theme was, "Let's not make a fuss about any of this; there's no reason why a child should mind having its genitalia touched." He attempted to quell the prudish reactions of parents, teachers, and society by saying that becoming "hysterical" about it would do much more harm to the child than the sexual assault itself. Underlying this idea of harmlessness is a real failure to distinguish between coercive and consensual sex, and a belief that sex between men and women requires male dominance. These themes are not just part of the men's magazine culture; they are part of the professional sex manual and medical culture. I'll read to you from a standard medical text—*Novak's Textbook of Gynecology*, published in 1981:

> The frequency of intercourse depends entirely upon the male sex drive... The female should be advised to allow her male partner's sex drive to set their pace and she should attempt to gear hers satisfactorily to his... Lack of consideration for the male partner's inherent physical drive is a common cause of impotence, and reflects an immature attitude of the female who is using her partner for self-gratification.[14]

And here's a quote from David Reuben's syndicated column on sex—advice to millions of readers:

> There are some wives who still suffer strong pangs of guilt over sex and only allow themselves to participate if it is supposedly against their will. If everything is all right once you get started, just remind yourself that you are committing rape by request and contributing to your wife's overall sexual satisfaction.[15]

The second group of rationalizations concedes that sexual assault may be harmful, but puts the blame on someone other than the offender—usually the victim:

The male is not responsible—she provoked it. This "Lolita argument" got wide publicity in 1982 in Lancaster, Wisconsin, when Grant County Circuit Court Judge William Reinecke sentenced a 24-year-old man to 90 days in a work-release program for sexually assaulting the 5-year-old daughter of the woman with whom he lived. In explaining the sentence, Judge Reinecke said, "I am satisfied that we have an unusually sexually promiscuous young lady, and he did not know enough to refuse. No way do I believe the man initiated sexual contact."[16]

Sex is an entitlement for men. If a woman provokes a man in some way, rape is often considered a permissible response. This is especially true if the male sexual demand is frustrated. That is, if a woman "leads him on" but doesn't want sex, rape is acceptable. The male sexual drive is not to be denied, and a woman who has the effrontery to refuse or change her mind deserves to be punished.

Social functions of sexual violence

Why is sexual violence condoned? The only satisfactory explanation that I can derive echoes opinions of feminist writers—Susan Brownmiller[17] and others: Although it is carried out by individuals or small groups of men, sexual assault is not simply a personal or individual act. It is a socialized behavior and a means

by which male supremacy is enforced and perpetuated. It is a form of terrorism by which men as a group keep women as a group frightened and submissive. It serves the same political function as the lynch threat or the pogrom. Perpetrators understand intuitively that the purpose of their behavior is to put women in our place and that their behavior will be condoned by other men as long as the victim is a legitimate target. Most rape trials still focus on establishing the fact that the victim was a legitimate target, and therefore that the rape was not a crime.

This rationale also explains the rapist's attitude of entitlement, lack of remorse, and failure to respond to pleas of conscience. Linda Gordon, a historian at the University of Massachusetts, is studying the history of domestic and sexual violence, and she has reviewed incest cases that were reported to the child protective services around the turn of the century. She says the distinguishing feature of the incest cases, in contrast to the physical abuse cases, was the lack of contrition and the attitude of entitlement in the perpetrators. The men who beat their wives or children at least felt some regret after the assault, viewing their own behavior as a loss of control. The incestuous fathers, however, rarely showed remorse.[18]

Strategies for resistance

If sexual violence serves a political purpose, benefitting men as a group, then women cannot expect, certainly in the short term, that men will be a meaningful source of protection. The real source of protection against sexual assault must be ourselves and other women. There are even some research data to support this contention. In several studies of childhood sexual assault, it is clear that girls who are alienated from their mothers, or who are physically separated from their mothers for any length of time, are at much higher risk for all forms of sexual assault. In my own survey of treatment programs for incest and child sexual abuse, one of the main points of consensus was that if the family could be rebuilt at all, the key to recovery for the victim and restoration of the family was the mother-daughter relationship. Where that could be strengthened and restored, the victims did well; where it could not, the victims had a much harder time.

Pauline Bart[19, 20] has done some fascinating research on women who successfully avoided rape. She advertised for women who got away from attackers, found them, and compared them to a group of women who were raped. She found that the rape avoiders had high self-esteem and a sense of entitlement; they were prepared to fight and had contact sports experience; they were prepared to act in a crisis. Interestingly, one of the most significant discriminating questions on her interview was, "What would you do if you had a broiler fire?" (She figured that was an emergency that all women face at one time or another.) The rape avoiders said something like, "I'd throw salt on it or baking soda, or I'd close the broiler." The women who were raped said something like, "Gee—I don't know—what *would* I do?"

The rape victims feared murder and submitted. The rape avoiders were determined not to be raped. The avoiders had an attitude of "The hell you say! You're not going to rape me!" And they used every strategy they could think of. They screamed, they ran, they talked long enough to delay action so they could get away or somebody might come along, they did whatever they could think of. Finally, the rape avoiders were *not* traditionally feminine, ladylike, or trusting. For example, one victim opened her door to help a man who said his car had broken down and that he needed to use the phone to call a towtruck. When she let him into the house to use the phone, he raped her. In contrast, one of the rape avoiders saw a man on the other side of the subway platform start to walk toward the stairs to approach her. She didn't worry about whether he was lost and was coming to ask for directions, or whether it would look funny for her to be running away. She just ran! Bart concludes her interpretation of findings by proposing that the Eriksonian stages of psychological development should be rewritten for women—with the first stage to be mastered being basic *mistrust!*

Finally, the organized efforts of women in the last 10 years have changed rape laws in every state, created rape crisis centers in every major city, established the National Center for Prevention and Control of Rape, and ended secrecy and raised consciousness about rape. These results, for women by women, illustrate that ultimately we are the source of safety and protection.

Implications for women's psychological development

All of this information and theory has profound implications for female psychological development.

First of all, I think we all live in fear of sexual assault all of our lives. The fear is pervasive, but it cannot be expressed directly, since explicit discussion of male sexual violence has been taboo for so long. So my own guess is that the fear of sexual assault, like other repressed emotions, returns in symptoms—for example, consider the traditional female symptom of "frigidity."

Helen Singer Kaplan's book *The New Sex Therapy*[21] does not have the words *rape, incest,* or *violence* in the index. She cites one case history of a woman with

vaginismus who said a friend of hers was raped and she became sexually anxious; this response was described to be phobic. The book reflects no consciousness of sexual assault, and the author's assumption seems to be that heterosexual sex always is sensual and caring. The provisions of sex therapy, the rules of sensate focus, and other techniques are offered as protections from performance anxiety and fear of abandonment, which Kaplan thinks are the main things we worry about when we have sex. But the truth is that they also are protections from forced sex. Frankly I think this approach to sex—deemphasizing the penis, deemphasizing the male superior position, and deemphasizing the male sexual rhythm and timing and orgasm as the beginning, middle, and end of the sex act—offers some possibility for women in heterosexual relationships to develop their own responsiveness.

Finally, I think the fear of sexual violence has a profound effect on mother-daughter relationships. In our current mythology, mother in the role of protector is trivialized. At best, she is ridiculed as an anxious, restrictive prude; at worst, she is jealous of her daughter's sexuality. Because the real problem can't be named, it becomes mystified as a concern over modesty or virginity. The daughter then sees her mother as a stifling jailer trying to rob her of her sexuality; our popular fairy tales present the heroine's task as escaping from the wicked stepmother into the arms of the rescuing prince. Going back to the original Cinderella story, however, we find the story of a girl whose good mother died, leaving her unprotected. The little girl plants a tree on her mother's grave and waters it with her tears, and it is this tree that grows into the magic source of her gifts. Even in the Disney version, the fairy godmother appears outside in a garden as Cinderella cries under a big tree. That big tree is the disguised representation of the protective mother. For, in fact, the development, in women, of a potential for intimacy and for satisfying sexual relationships probably depends on self-esteem and the capacity for self-protection—which is the internalization of a protective mother who will fight for her daughter and for herself.

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Discussion Summary

After each colloquium lecture, a discussion session is held so that students and visitors can exchange ideas with each other and with the speaker. Questions, responses, and highlights of the discussion are selected, summarized, edited, and presented here to expand and clarify the speaker's ideas. In this session Dr. Jean Baker Miller of the Stone Center joined Dr. Herman in leading the discussion.

Question: I read one of your papers in which you said that incest victims came from families in which the father was very dominating in an extreme patriarchial mode. Would you explain that?

Herman: We found that the fathers were willing to use force in order to dominate their families. Half the daughters had seen their fathers beating mothers or other children in the family. The daughter selected to be in the incestuous relationship was usually spared the beatings, and she had a good idea of what would happen if she did not comply. The other clear thing in the incest families was a great discrepancy in power between father and mother. The mothers had few options and felt that they had to preserve their marriages at all costs, either because of economic dependency or because they were ill or handicapped. They could not imagine independent survival.

Question: In my work I have seen a number of people in groups for bulimics who have been incest victims; a colleague has seen bulimia among persons in groups for rape and incest victims. Do you have some thoughts on this relationship?

Herman: I did not see this in my research or my patients, but I think that early sexual abuse may underlie a host of women's disorders. New evidence points to its association with multiple personality disorders and other psychiatric syndromes. We don't know the most salient associations yet, because we don't get a routine sexual experience history from everyone we see. More and more it seems warranted to ask everyone about sexual assault.

Question: I agree that we experience a pervasive threat of sexual assault and we have constant reminders of intimidation—we are warned to walk only in certain places, wear only certain kinds of clothes, or behave in certain ways. How does this constant theme affect women's psychological development?

Herman: Like any chronically intimidated individual, every woman is resentful, frightened, and angry. Because these emotions are so unacceptable and deviant, however, they disguise themselves as symptoms.

Miller: To take the notion further, the threat does affect the development of all women in a profound and central way. It stamps a mind-boggling idea in one's mind: You don't own yourself; somebody else has the right to control you. We have had to work around that threat to find a way to have the right just to *be*.

Herman: As we track the connection between victimization and the development of psychiatric symptoms, I think we will see some of the dynamics in all of us. Elaine Carmen and her associates studied women and men who had been victimized as adolescents. (*American Journal of Psychiatry*, 14(3): 378-383, 1984) In later life male vicitims became more violent and abusive to others; female victims became more self-destructive. Childhood trauma—physical or sexual—was associated with the most mutilating and self-destructive acts. Rather than believe they have crazy parents, abused children believe they deserve abuse, so they attempt to master the experience with self-punishment. Perhaps we all internalize the concept that, in order for a harsh world to have meaning, we must be guilty of something.

Comment: As a rape survivor working with other rape survivors, I usually see women with barely enough self-esteem to break through secrecy and talk about their experience. They feel guilty about having been vulnerable and not having been able to get away.

Herman: Before going further, I want to honor you and thank you for breaking the secrecy and speaking out about your own experience. Your speaking out is one more step toward removing stigma from victims.

There is some sort of connection between being vulnerable and the likelihood of being raped. Children who have been sexually assaulted are at higher risk for being beaten and sexually assaulted later. There is a way that women are socialized to become victims, and it's effective, particularly if you start when they're young.

Interviews with rapists reveal that the pattern for sexual assault is that men build up from easy, vulnerable women least capable of resistance—for example, older women or children—to eventually trying to attack uppity, resistant, fighting women—the most prized victims. In one study of imprisoned rapists, psychological test results plus interviews led the investigator to conclude that sexual assault was direct expression of the men's hostility toward all women.

Miller: At a conference for therapists with disabilities I talked with a man who had become disabled later in life; he had had the adult experience or being "normal" and could contrast it with being disabled. He felt that he was able to defend himself quite well after he became disabled, but he was not perceived that way, and he

was attacked more often. In the minds of potential attackers he was weaker, more vulnerable, and an easy target.

Herman: An important practical suggestion also came out of Pauline Bart's study. The one thing that never seemed to work was pleading with a rapist. Engaging him in conversation as a delaying tactic was useful, but attempting to elicit sympathy seemed to be a uniformly losing strategy.

Question: It is disturbing to think of psychiatrists espousing notions such as childhood sexual fantasies and female masochism, for they can use such constructs to reinforce secrecy and self-blame. To what extent are those attitudes changing in the psychiatric profession?

Herman: The Freudian ideology remains dominant, but there has been considerable change within recent years. The most difficult audiences I speak to are psychiatrists, but change is percolating up from the rank and file of mental health professions. Whereas psychiatrists may run hospitals or direct programs, the majority of front-line workers are women; collectively they are having an influence in challenging old assumptions. Nonetheless, I have been called in to consult on cases where there is a dramatic split in staff opinions—the women believe the victim, the men don't. Similar things happen in the courts. A few months ago I testified in a case where a mother, when she learned that her husband was sexually assaulting their 4-year-old child, immediately took the child and left town. The husband got a court order demanding return of the child. The court-appointed male psychiatrist concluded that the mother was paranoid, basing his diagnosis on her assertion that her husband had molested the child. Custody was awarded to the father. The courtroom was split along sex lines, with the men—including the judge—believing the father and the women believing the mother. The issue evokes much controversy, fighting, and dissension in both the mental health and the legal professions.

Miller: At the risk of sounding defensive, we can't expect psychiatrists to be better than other human beings. The reality is that we all were taught Freudian ideas. I never heard of incest in my own training—except for learning that Freud made that mistake, then recovered a year later and reconstructed his theory. Because we were well-trained, we never believed stories of incest when we heard them. In other words, one does not have to be malevolent to hold such attitudes. With that in mind, the changes that have been made in the past decade are phenomenal! Fifteen years ago we would have all been declared incompetent professionals for holding this kind of discussion! The change has come from women pressing on the profession, and from a few heroines within the profession. They struggled hard—often with a lot of courage—to challenge their colleagues and question longstanding theories which everyone honored.

Question: What about our daughters? Should we teach them not to trust the men closest to them? Or not to trust any men? Do we really want them to learn basic mistrust?

Herman: I'm not sure this is any different from teaching our children about other dangers in the real world. We have to break a lot of bad news to children as they grow up, although we would like for the real world to suspend danger so that our kids never have to live in fear. Nonetheless, I am convinced that children are much more frightened by secrecy than they are by truth. It is possible to teach a little girl that no one has the right to touch her body in a way that she doesn't want or doesn't invite, and that certain parts of her body are only for her. Also it is important to teach that if anyone does try to touch her or hurt her, she should tell you about it and you will believe her. (Of course the instructions are just the same for boys.) And other sorts of infringements can be curtailed—for example, insisting that a child must submit to just any relative's hugs or kisses is a subtle support for the notion that grownups have the right to touch a child any way they want. We should give a different, healthier message.

Question: We also must take care of ourselves and be realistic about danger, but when we have to live with fear of violence it generates anger and hatred. How can we handle those feelings?

Herman: The first thing we can do is talk about our feelings and our experiences to break down secrecy and create safety for each other. I find that one constructive way for groups to express outrage and determination is to stage "Take Back the Night" demonstrations. In those marches women walk together in places that might ordinarily be too dangerous to walk through. The last time I was in one I liked the chant we used:

Yes means yes, no means no —
However we dress, wherever we go.

Women are making changes in the systems. More and more, when a woman calls for help, a woman is there to answer the call—and helping each other is the only way we can make the changes we want.